

RICHMOND STATE HOSPITAL
Facility Fact Sheet
SFY 2016

Richmond State Hospital has served persons with mental illness since 1890. Major additions to the campus include the Residential Treatment Center, which opened in 1992 and the Clinical Treatment Center, which opened in August 2002. The Residential Treatment Center, as well as our 417 building, houses the majority of our patient population. The Clinical Treatment Center emphasizes active treatment using the treatment mall approach, which includes multiple classrooms, social area, gymnasium, dental clinic, crafts, training center and pharmacy.

Richmond State Hospital has maintained accreditation from the Joint Commission since 1986. The requirements set forth from the Joint Commission and met by the hospital focus on systems critical to the safety, quality of care, treatment and services provided. The Joint Commission accreditation also has gained the hospital deemed status with federal Medicare and Medicaid programs which allow for federal reimbursement. The hospital continued with their full accreditation status having our last survey in August 2013.

Patient population at Richmond State Hospital is organized into patient care modules with a total bed capacity of 213. We continue to monitor the cost per patient day and the patients who have been in hospital over 18 months. Both measures are well within the range of the performance expectations.

- **420A & B Seriously Mentally Ill:** A 60 bed co-ed care module that admits and provides recovery services for patients with severe and persistent mental illness with the goal of attaining symptom management and skill development for community living. The admission unit's focus is to identify and stabilize the mental health needs and to prepare the patients to return to the community.
- **421A & B Integrated Dual Diagnoses:** A 60 bed co-ed care module that specializes in the care of patients with mental illness and a substance abuse/dependency problem using established best practices as a framework for recovery.
- **422A & B SMI Continuing Care/Medical/Geriatric:** A 60 bed co-ed care module that provides continued services for patients with severe and persistent mental illness. Recovery programming is focused on learning skills such as coping, social, leisure time, emotion regulation, and anger management. These units also have patients with activities of daily living deficits as well as needing mobility assistance. Due to the flooring and window project in the RTC units, 24 of these beds have been located on the 417C unit.
- **417A Seriously Mentally Ill/Developmentally Disabled:** A 23 bed co-ed care module that provides recovery services for individuals with a mental illness and an intellectual disability. The treatment focuses on social skills, self care, behavioral regulation, and symptom management in preparation for community and family living. This unit also includes our fluid management population newly established at the hospital in spring 2011.

State Fiscal Year 2016 up till June 9th

Admissions	85
Discharges	107
Average Daily Population	182

Staffing

Positions on the Staffing table	459
Filled FTE Positions	355

Treatment is individualized through interdisciplinary assessments and may include stabilization of symptoms through psychopharmacology, management of medical problems, individual and group therapy, patient and family education, rehabilitation and recreation therapy, academic and skills training, and vocational training. The interdisciplinary approach utilizes the Treatment Team to oversee the patient's care. Members of the team, based on the patient's needs, may include a psychiatrist/physician, psychologist or behavioral clinician, social service specialist, dietitian, rehabilitation therapist, nurses, behavioral healthcare recovery assistants, recovery specialists and substance abuse counselors.

We provide individualized services based on comprehensive and ongoing assessment. We base services on established theory and empirically supported approaches. We provide services in a coordinated manner with active collaboration between the various clinical disciplines. We provide care and treatment in a respectful and humane fashion while focusing on skills, interests, and strengths as well as signs and symptoms of illness. We provide direct instruction to increase skills related to living in the community or transitioning to less restrictive environments. We involve consumers and their families in planning, on a program level, as well as the individual level. We provide services with sensitivity to ethnic, gender, cultural and family characteristics and values.

Our clinical model of care emphasizes the combination (FACT) of Acceptance and Commitment Therapy (ACT) and Functional Analytic Psychotherapy (FAP) as a basic stance. Both therapies share a behavior analytic background and research demonstrates the effectiveness and utility of ACT and FAP in treating consumers with a variety of clinical difficulties. All aspects of the Recovery Model; Psychosocial Rehabilitation; Motivational Interviewing techniques; Skills Training; and Dialectical Behavior Therapy techniques such as mindfulness, distress tolerance, interpersonal effectiveness, and emotion regulation are incorporated, with FACT serving as the foundation for therapeutic services, staff-consumer interaction, planning, and staff training.

We also have more specific information about the hospital @ www.richmondstatehospital.org.

Executive Team

Dr. Warren Fournier, Interim Superintendent/Medical Director
Josh Nolan, Psy.D. Clinical Director
Judy Cole, RN Point of Contact for Nursing
Kay Stephan, Quality Management Director
Tara Jamison, Community Relations Director
Terresa Bradburn, Human Resources Director
Vacant Assistant Superintendent Administration

